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PTO/SB/21 (09-04)
Approved for use through 07/31/2006, OMB 0651-0301

Under the Par	De Anna All Act of 199	5. no persons are required to respond		rademark Office; L	through 07/31/2006. OMB 0651-0031 J.S. DEPARTMENT OF COMMERCE displays a valid OMB control number						
		Application Number									
TR	ANSMITTAL	Filing Date	7/18/2003	7/18/2003							
	FORM	First Named Invento	engleson	Engleson							
		Art Unit	2121								
(to be used for	all correspondence after initia			Ronald D. Hartman, Jr.							
Total Number of	Pages in This Submission	Attorney Docket Nu	mber IVACP-650	IVACP-65055							
ENCLOSURES (Check all that apply)											
	smittal Form	Drawing(s) Licensing-related Paper	ore	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences							
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Petition Petition to Convert to a Provisional Application Power of Attorney, Rechange of Correspond Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table Remarks	a vocation lence Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Postcard							
Flori Name	SIGN	ATURE OF APPLICANT, A	ATTORNEY, C	R AGENT							
Firm Name	FULWIDER PATTON LE	EE & UTECHT, LLP									
Signature Why X. Heerla											
Printed name	John K. Fitzgerald	B									
Date	11/23/2004		Reg. No.	. No. 38,881							
CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature	John	K) (gende									
Typed or printed name John K. Fitzgerald, Reg. No. 38,881											

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 10/01/2004. Patent fees are subject to annual revision.

Complete if Known

Application Number

10/622,983

	KAN		IAL	Filing Date 7/18/2003				
F	or FY	2005		First Named Inventor	Engleson			
A!:A -1-!	-114'4	0 07	OFD 4 07	Examiner Name	Ronald D.	Hartman	ı, Jr.	
Applicant claims sm	all entity st	atus. See 37	CFR 1.2/	Art Unit	2121			
TOTAL AMOUNT OF PA	YMENT	(^{\$)} 110.0	0	Attorney Docket No.	IVACP-650	55		
METHOD OF PAYN	IENT (ch	eck all that ap	oply)	FEE CALCULATION (continued)				
X Check Credit Card Money Order X Deposit Account None			2. EXTRA CLAIM	FEES		Small Entity		
			Fee Description		Fee (\$)	Fee (\$)		
			Each claim over 20 Each independent cl	aim over 3	18 88	9 44		
Deposit			Multiple dependent		300	150		
Account 06-24	25			For Reissues, each c	laim over 20 and	d		
Deposit				more than in the or		18	9	
Account FULWI	DER PA	TTON		For Reissues, each in more than in the or		n 88	44	
The Director is hereby	v authorize	d to: (check all	that apply)			• •	44	
The Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below				<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> 20 or HP = x =				
Charge ree(s) indicated below				HP = highest number of total claims paid for, if greater than 20				
			or the filing fee	Indep. Claims				
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17				- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3				
X Credit any overpayments				Multiple Dependent C	Claims	Fee (\$)	ee Paid (\$)	
to the above identifie	d danasit s	account						
to the above-identified deposit account.				Subtotal (2) \$ 0				
Other (please identif	fy):			3. OTHER FEES		Small Entity	,	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038.				Fee Description	Fee (\$)	Fee (\$)	Fee Paid(\$)	
				1-month extension of the		55		
FEE CALCULATION				2-month extension of the	ime 430	215		
1. BASIC FILING FEE				3-month extension of the	ime 980	490		
	5	Small Entity		4-month extension of the	ime 1,530	765		
Fee Description	Fee (\$)	Fee (\$)	Fee Paid(\$)	5-month extension of ti	ime 2,080	1,040		
Utility Filing Fee	790	395		Information disclosure	stmt. fee 180	180		
	0.50			37 CFR 1.17(q) proces	sing fee 50	50		
Design Filing Fee	350	175		Non-English specificat	ion 130	130		
Plant Filing Fee	550	275		Notice of Appeal	340	170		
Reissue Filing Fee	790	395		Filing a brief in suppor	t of appeal 340	170		
Trongae I ming I ee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	373		Request for oral hearing	g 300	150		
Provisional Filing Fee	160	80		Other: Statutor	y 1.20(d)		110.00	
Subtotal (1) \$ 0					Subtotal	(3) \$	110.00	

Name (Print/Type John K. Fitzgarald Date 11/23/2004

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Registration No.

(Attorney/Agent)

38,881

Telephone 310/824-5555

SUBMITTED BY

Signature